

SANDY PARKS & RECREATION
440 EAST 8680 SOUTH - SANDY, UTAH 84070
P: (801)568-2900 F: (801) 561-6733

2009 SPRING RECREATION SOCCER - TEAM PRE-APPROVAL FORM

COACH _____ Day) _____ Evening) _____ C) _____

ADDRESS: _____ E-MAIL: _____

ASSISTANT COACH _____ Day) _____ Evening) _____ C) _____

LOCATION /LEAGUE _____ GRADE LEVEL _____

Years together as a team: _____ Uniform color last season: _____ Would you like the same color: _____

Office Use Only:

PLAYERS NAME (Please print)	GRADE	YEARS EXPERIENCE	PLAYED LAST SEASON ON A COMPETITIVE TEAM	ELEMENTARY SCHOOL AREA
1.			__ YES __ NO	
2.			__ YES __ NO	
3.			__ YES __ NO	
4.			__ YES __ NO	
5.			__ YES __ NO	
6.			__ YES __ NO	
7.			__ YES __ NO	
8.			__ YES __ NO	
9.			__ YES __ NO	
10.			__ YES __ NO	
11.			__ YES __ NO	
12.			__ YES __ NO	
13.			__ YES __ NO	
14.			__ YES __ NO	
15.			__ YES __ NO	
16.			__ YES __ NO	

COACHES PLEASE READ: Please attach players' registration forms, payment, and return completed information as soon as possible. There are a limited number of participant spots available at each location. If a player's form is not attached, please note it next to their name.

Listing a player does not guarantee they will be on your team or included in the count. If the league fills, other unassigned players will be given that spot.

I certify that the above information is accurate and agree to provide Sandy City with any other information needed to place my players in the proper division of play.

Coach's Printed Name

Signature

Date